

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002127

FILED  
Feb 18, 2007  
Secretary of State

Entity Name: FAITHWORKS, INC.

## Current Principal Place of Business:

5 N BESTPOINT  
INVERNESS, FL 34450

## New Principal Place of Business:

9000 MONTEVALLO COURT  
ORLANDO, FL 32818

## Current Mailing Address:

5 N BESTPOINT  
INVERNESS, FL 34450

## New Mailing Address:

9000 MONTEVELLO COURT  
ORLANDO, FL 32818

FEI Number: 65-0992673

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUNDELIUS, WALTER D SR.  
5 N BEST POINT  
INVERNESS, FL 34450 US

## Name and Address of New Registered Agent:

SLAVIN, LYNN  
9000 MONTEVALLO COURT  
ORLANDO, FL 32818 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LYNN SLAVIN

02/18/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: LUNDELIUS, WALTER D SR.  
Address: 5 N BEST POINT  
City-St-Zip: INVERNESS, FL 34450

Title: PD ( ) Delete  
Name: SLAVIN, MICHAEL E  
Address: % JEFF HANSON  
City-St-Zip: TUSTIN, CA 92782

Title: VD ( ) Delete  
Name: SLAVIN, LYNN B  
Address: % JEFF HANSON  
City-St-Zip: TUSTIN, CA 92782

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition  
Name: SLAVIN, LYNN  
Address: 9000 MONTEVALLO COURT  
City-St-Zip: ORLANDO, FL 32818

Title: PD (X) Change ( ) Addition  
Name: SLAVIN, MICHAEL E  
Address: 9000 MONTEVALLO COURT  
City-St-Zip: ORLANDO, FL 32818

Title: VD (X) Change ( ) Addition  
Name: SLAVIN, LYNN B  
Address: 9000 MONTEVALLO COURT  
City-St-Zip: ORLANDO, FL 32818

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL SLAVIN

PD

02/18/2007

Electronic Signature of Signing Officer or Director

Date